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No	of	Dagge	П
110.	OT.	Pages	Transmitted

Cover Sheet + 17

Date: May 7, 2003

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U. S. PATENT AND TRADEMARK OFFICE

City/State/Country: Washington, D.C.

Telecopier No.:

(703) 872-9311

FROM: Bruce R. Mansfield,

Dispatched by: Susan K.

MESSAGE:

OUR FILE NO.: 66688/1410

Please see attached.

MAY 0 8 2003

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(XX) PLEASE ACKNOWLEDGE RECEIPT OF THIS COMMUNICATION

<u> Patent</u>

Attorney Docket No. 66688

Certificate of Facsimile

I hereby certify that this paper for Serial No.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Barr et al.

Appln No.: 09/661,171

September 13, 2000

For: **END-LOAD CARTON**

PACKAGING INCLUDING FOOD

DELIVERY SYSTEM

Group Art

Filed:

Unit: 1761

Examiner: Robert A. Madsen 09/661,171 is being facsimile transmitted to Examiner R. Madsen at the Patent and Trademark Office fax number (703), 872-9311.

0 7 2003

Date

Bruce R. Mansfield

Registration No. 29,088 Attorney for Applicant

Mail Stop AF Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment/reply in the above-identified application.

- ☑ Included with this amendment/reply are clean paragraphs/claims and marked-up paragraphs/claims according to 37 C.F.R. §1.121.
- □ A paper requesting correction/substitution of drawings is attached.
- No additional fee is required.

Fee Calculation For Claims As Amended

-	os odiculatio	on Clai	ms A	<u>s Amen</u>	ded			
	As Amended	Previously Paid For		Present Extra		Rate	A	Additional
Independent Claims	1 -	4	**=	•				Fee
Total Claims	12		•		x \$	84.00	= \$	0.00
		18	* =	0	x \$	18.00	~ &	
Fee for Multiply Dep	endent Claims	3						0.00
** At least 3						280.00		
				Total Ad	ditio	nal Fee	ŝ	0.00
* At least 20							<u> </u>	0.00
Applicant(s) assert e	ntitlement to	S 11						

☐ Applicant(s) assert entitlement to Small Entity Status, thus reducing the fee by half to:

0.00

Attorney Docket No. 66688

<u></u>	A check in the amount of \$	is	attached.
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- □ Charge \$____ to Deposit Account No. 06-1135.
- The Commissioner is hereby authorized to charge any additional fees which may be required in this application under 37 C.F.R. §§1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 06-1135. Should no proper payment be enclosed herewith, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1135. A duplicate copy of this sheet is enclosed.

MAY 0 7 2003

Date

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